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| | MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET | | | | | Application Number 10/718,131 | | | Filing Date 20 November, 2003 | | | ☐ To be Mailed | | |
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| Substitute for Form PTO-1360 (For use with Form PTO/SB/06) | | | | | Applicant(| s) ROSS, J | ULIAN | | | | Page 1 of 1 | | | |
| | | | | | | | * May be | sed for addi | tional claims | or amendm | ents | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT 02/21/2007 | | AFTER SEC. AMENDMENT | | | * | | * | | * | | |
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